



SEP 27 2006 Please type a plus sign (+) inside this box →

09-28-06

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HDP/SB/21 based on PTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/644,679
		Filing Date	08/20/2003
		First Named Inventor	Gordon R. Inch
		Group Art Unit	3725
		Examiner Name	Dmitry Suhol
Total Number of Pages in This Submission	3	Attorney Docket Number	9539-000099

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Letter of Error of Record; return receipt postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Philip E. Rettig	Reg. No. 34,000
Signature			
Date	September 27, 2006		

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as express mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

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Signature		Date	September 27, 2006

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Philip E. Rettig
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September 27, 2006

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Re: U.S. Patent No. 7,036,349 - Issued: May 2, 2006
First Named Inventor: Gordon R. Inch
For: SCALLOP OUTPUT SHAFT TOOLS
Attorney Docket No. 9539-000099

Sir:

We have reviewed the above-identified patent and have found the following errors:

Column 4, Line 63, Claim 1; Application Page 2, Line 8, Claim 1	After "retainer", insert --ring--
Column 5, Line 42-43, Claim 9; Application Page 4, Line 1, Claim 9	After "insert", delete "and"

Kindly make these errors of record in your files.

Respectfully submitted,

By: 
Philip E. Rettig
Reg. No. 34,000

PER/srh